A survey of residents of the Bloomington-Normal area regarding cigarette smoking in public places

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NOTE: The public opinion survey findings presented here are brief, due to time constraints. If these reports of marginal response rates and selected cross-tabulation tables raise questions that go unanswered here, please contact me. I am happy to work with you to explore more fully the patterns contained in respondents' answers.

Introduction and summary of findings:

At the request of the IPLAN working group at the McLean County Health Department, six questions regarding cigarette smoking in public places were added to a public opinion survey being conducted during March 2004 as part of a class project at Illinois Wesleyan University. The questions explore local opinions on whether smoking in bars and restaurants should be limited to separately ventilated no-smoking sections or whether smoking in these establishments should be permitted at all. The questions on smoking were written in collaboration with the members of the staff at the McLean County Health Department. A random sample of 537 adult area residents was interviewed by telephone between March 5 and March 11, 2004. Discussion of the survey methodology appears in the methodology section below.

Overall, respondents expressed solid support for banning smoking from restaurants, though not from bars. Fully 71% of respondents thought people should not be allowed to smoke in restaurants, versus only 29% who would not allow smoking in bars.

When asked about their support for required separately ventilated smoking sections in restaurants, 59% supported this idea for both bars and restaurants. [About one-quarter (23%) supported this idea just for restaurants, and 8% supported this idea only for bars]. When asked to think about whether the presence of a separately ventilated no-smoking section would make them more or less likely to visit a given restaurant, just over half (56%) of respondents said yes. When asked to compare two hypothetical restaurants – one that does not allow smoking and one that allows smoking only in a separately ventilated section – a bare majority (52%) expressed a preference for the restaurant that does not allow smoking at all. One-quarter (25%) expressed indifference on this item.

Another question asked respondents to listen to an argument about the (implicitly causal) relationship between rates of cardiovascular illness and limits on public smoking. Respondents were then asked whether hearing this information made them more or less likely to support a ban on smoking in bars and restaurants. Well over half (58%) reported that this information made them more likely to support a smoking ban. Less than 4% said this information made them more likely to oppose a smoking ban for restaurants and bars. Thirty seven percent said this information made no difference in their willingness to accept a smoking ban for restaurants and bars. To this question and others the percentage of respondents offering "don't know" responses was appropriately low, typically about 5%.

Overall percentage (marginal) response rates to each of the six questions appear below. The questions were asked in the order shown here.

- 1) I'd like to ask you a few questions about cigarette smoking in public places. Currently, people are not permitted to smoke in most government or corporate offices, schools, theaters, or stores. Generally speaking, do you think that people should be allowed to smoke in restaurants?
- Yes, allow
- No, don't allow
- 5 It depends (volunteered)
- 1 Don't know
- 2) And generally speaking, do you think that people should be allowed to smoke in bars?
- Yes, allow smoking
- No, don't allow smoking
- 3 It depends (volunteered)
- 4 Don't know
- 3) Do you think restaurants or bars should be required to maintain a no smoking section with a separate ventilation system to clean the air in that section? (*if yes:* is that for bars, or restaurants, or both?)
- 8 Yes for bars
- 23 Yes for restaurants
- Yes for both bars and restaurants
- 9 No
- 2 Don't know
- 4) Now, imagine you're considering visiting a particular restaurant for a meal and you learn that that restaurant has a separately ventilated no-smoking section. Does the presence of a separately ventilated no-smoking section in that restaurant make you more likely or less likely to visit that restaurant, or does this make no difference to you? (is that much more or only slightly more likely/unlikely?)
- 34 Much more likely
- 21 Slightly more likely
- 1 Slightly less likely
- 1 Much less likely
- 42 No difference
- 1 Don't know
- 5) Next, imagine you're considering a pair of restaurants that are very similar and that you like equally well. Imagine that one of them does not allow smoking at all, while the other allows smoking only in a separately ventilated section. Which restaurant would you prefer to visit, the one that does not allow smoking at all, or the one that allows it only in a separately ventilated section?
- The one that does not allow smoking
- The one with a separate section
- 25 Indifferent (volunteered)
- 1 Don't know

- 6) Many public health experts are concerned about the dangers of second-hand smoke. They point to studies showing that communities that do not allow smoking in most public places have lower rates of cardio-vascular illness than communities that generally allow public smoking. Less exposure to second-hand smoke seems to reduce rates of cardio-vascular illness. Does this information make you more likely or less likely to support a ban on smoking in restaurants and bars, or does it make no difference for you?
- 40 Much more likely
- 18 Somewhat more likely
- 37 Makes no difference
- 2 Somewhat less likely
- 2 Much less likely
- 2 Don't know
- 7) Do you smoke?
- 16 Yes
- 4 Yes, but trying to quit
- 79 No

Selected sub-group analysis (cross-tabulation tables)

The marginal response rates shown above mask some important sub-group differences on these questions. The following sections show sub-group responses by smokers vs. non-smokers, education, income, and age. Place of residence (Bloomington, Normal, or the outlying areas) was not associated with systematic differences in public opinion on these issues.

Cross-tabulation of responses by smoker/non-smoker self-identification

As expected, smokers and non-smokers differ systematically and broadly in their opinions on smoking restrictions. The largest differences come on the initial pair of questions asking whether people should be allowed to smoke in restaurants or, separately, bars. Non-smokers also strongly prefered to visit a hypothetical restaurant that does not allow smoking at all over one that has a separately ventilated section, and in this sentiment they differ dramatically from smokers. On the other hand, smokers and non-smokers offered nearly identical response patterns to the question about requiring bars or restaurants to maintain separately ventilated no-smoking sections, with 58% of both groups affirming this position for both restaurants and bars. The cross-tabulation tables below compare smokers to non-smokers. Respondents who self-identified as smokers who are trying to quit are combined with smokers in these tables. See the reports above for full question wording. (Twenty one percent, or 111, of the respondents fell into the combined smoker/trying to quit category, compared to 79% of respondents, or 423 of them, who identified themselves as non-smokers.)

... do you think people should be allowed to smoke in restaurants?

	Non-smokers	Smokers
Allow smoking	13	61
Do not allow smoking	82	28
It depends (volunteered)	4	8
Don't know	1	2

... do you think people should be allowed to smoke in bars?

	Non-smokers	Smokers
Allow smoking	58	92
Do not allow smoking	34	6
It depends (volunteered)	4	1
Don't know	5	1

... should [bars or restaurants] be required to maintain a no-smoking section with a separate ventilation system?

	Non-smokers	Smokers
No	9	10
Yes for restaurants	23	23
Yes for bars	8	9
Yes for both	58	58
Don't know	3	1

... does the presence of a separately ventilated no-smoking section make you more or less likely to visit [a hypothetical] restaurant?

	Non-smokers	Smokers	
Much more likely	39	15	
Slightly more likely	24	10	
No difference	34	73	
Slightly less likely	1	1	
Much less likely	1	0	
Don't know	1	1	

Comparing two hypothetical restaurants: one that does not allow smoking, and one that allows smoking only in a separately ventilated section. Which do you prefer?

	Non-smokers	Smokers
Does not allow smoking	62	13
Separate section	13	60
Indifferent (volunteered)	25	26
Don't know	1	1

Does information about a link between public smoking and cardiovascular illness lead people to be more supportive of a ban on smoking in bars and restaurants?

	Non-smokers	Smokers
Much more likely	46	15
Somewhat more likely	20	10
No difference	30	62
Somewhat less likely	1	4
Much less likely	1	5
Don't know	1	5

Cross-tabulation of responses by education category

Respondents with a four-year college degree were generally less permissive of smoking in bars and restaurants than were those with less than a four-year college degree. (Dividing respondents at this point formed two roughly equal-sized groups. There were 241 respondents with less than a four-year college degree, and there were 268 with a college degree or more.)

... do you think people should be allowed to smoke in restaurants?

	Less than 4-yr. college	4-yr. college or more
Allow smoking	30	18
Do not allow smoking	63	78
It depends (volunteered)	5	4
Don't know	1	1

... do you think people should be allowed to smoke in bars?

	Less than 4-yr. college	4-yr. college or more
Allow smoking	69	62
Do not allow smoking	25	29
It depends (volunteered)	1	5
Don't know	5	4

... should [bars or restaurants] be required to maintain a no-smoking section with a separate ventilation system?

	Less than 4-yr. college	4-yr. college or more
No	5	12
Yes for restaurants	20	26
Yes for bars	10	5
Yes for both	62	54
Don't know	1	3

... does the presence of a separately ventilated no-smoking section make you more or less likely to visit [a hypothetical] restaurant?

	Less than 4-yr. college	4-yr. college or more
Much more likely	29	37
Slightly more likely	14	29
No difference	53	32
Slightly less likely	2	Less than .5
Much less likely	1	Less than .5
Don't know	1	Less than .5

Comparing two hypothetical restaurants: one that does not allow smoking, and one that allows smoking only in a separately ventilated section. Which do you prefer?

	Less than 4-yr. college	4-yr. college or more
Does not allow smoking	44	58
Separate section	34	12
Indifferent (volunteered)	21	30
Don't know	1	1

Does information about a link between public smoking and cardiovascular illness lead people to be more supportive of a ban on smoking in bars and restaurants?

	Less than 4-yr. college	4-yr. college or more
Much more likely	36	42
Somewhat more likely	18	19
No difference	38	36
Somewhat less likely	3	1
Much less likely	3	1
Don't know	3	1

Cross-tabulation of responses by age group (18-30, 31-50, over 50)

Respondents were asked their age. (There were 102 respondents aged 18-30, 228 aged 31-50, and 181 aged 51 and over.)

... do you think people should be allowed to smoke in restaurants?

	18-30	31-50	Over 50
Allow smoking	27	24	23
Do not allow smoking	69	70	72
It depends (volunteered)	4	5	4
Don't know	1	Less than .5	2

... do you think people should be allowed to smoke in bars?

	18-30	31-50	Over 50
Allow smoking	80	65	59
Do not allow smoking	17	30	30
It depends (volunteered)	1	2	6
Don't know	2	4	6

... should [bars or restaurants] be required to maintain a no-smoking section with a separate ventilation system?

	18-30	31-50	Over 50
No	7	8	11
Yes for restaurants	32	24	16
Yes for bars	9	9	6
Yes for both	51	58	64
Don't know	1	1	3

... does the presence of a separately ventilated no-smoking section make you more or less likely to visit [a hypothetical] restaurant?

	18-30	31-50	Over 50
Much more likely	24	33	40
Slightly more likely	28	25	14
No difference	46	40	44
Slightly less likely	1	2	1
Much less likely	1	Less than .5	1
Don't know	1	Less than .5	1

Comparing two hypothetical restaurants: one that does not allow smoking, and one that allows smoking only in a separately ventilated section. Which do you prefer?

	18-30	31-50	Over 50
Does not allow smoking	44	57	48
Separate section	23	21	25
Indifferent (volunteered)	33	22	25
Don't know	0	Less than .5	2

Does information about a link between public smoking and cardiovascular illness lead people to be more supportive of a ban on smoking in bars and restaurants?

	18-30	31-50	Over 50
Much more likely	34	36	45
Somewhat more likely	20	22	15
No difference	42	40	31
Somewhat less likely	3	1	2
Much less likely	0	1	3
Don't know	1	1	3

Income is not a strong correlate with attitudes on smoking in bars and restaurants, though higher income respondents tended to offer slightly more support for limits on smoking in those places. Higher income people are less likely to be smokers. (58% of those reporting household income below \$15,000 per year self-identify as non-smokers, compared to 90% of those in households with over \$100,000 annual income. The largest step up in smoking rates occurs between the group reporting less than \$15,000 annual income and those reporting between \$16,000 and \$25,000.)

Methodology:

The survey was conducted between March 5 and March 11, 2004. A random, representative sample of 537 adults living in Bloomington-Normal and the surrounding area were interviewed by telephone. The geographic range of the respondent pool includes all the area within the local calling area. This includes Bloomington, Normal, Carlock, Cooksville, Danvers, Downs, Ellsworth, Heyworth, Hudson, McLean, Stanford, and Towanda. The sample was drawn so as to include households with both listed and unlisted telephone numbers. Overall, the survey results have a margin of error of plus/minus four percentage points at a 95% confidence level. Subgroup analysis involves higher margins of sampling error due to smaller samples within those sub-groups.

The six questions about public smoking were placed at the beginning of the questionnaire, so respondents could not have been influenced by the other items on the questionnaire when answering questions about smoking. Each respondent was asked if she/he is "a regular smoker" only after being asked the other five questions. Some respondents volunteered that they are smokers but are currently trying to quit. This group's responses were substantially similar to those of self-identified smokers.

To maximize the likelihood that each household in the sampling frame faced an equal probability of selection, interviews were conducted on five evenings and four afternoons, including five weekday evenings, three weekday afternoons, and one Saturday afternoon. When interviewers were initially unsuccessful at contacting a given household, up to two subsequent call-back attempts were made.

Students at Illinois Wesleyan University worked as interviewers on this project. They were closely supervised by the principal investigator. The facilities of Illinois Wesleyan University were used to conduct this project. Because human subjects (local residents) were involved, prior approval for this project was obtained from the University's Institutional Review Board, as required by federal regulation.

The principal investigator holds a Ph.D. in political science from Columbia University and is a member of the faculty of Illinois Wesleyan University. He has worked for the Public Agenda Foundation, a non-profit, non-partisan public opinion research organization in New York, where he was involved in the writing and analysis of numerous nation-wide public opinion surveys. He has also conducted four prior surveys of residents in the Bloomington-Normal area over the past few years. He is a regular contributing author to the journal *Public Opinion Quarterly*, in addition to other academic journals in political science.